									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003  108 150 90												70	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OF		R THAN L ENTITY	
TOTAL CLAIMS			20			•	RATE	FEE	7	RATE	FEE		
FOR			NUMBER FILED		NUM	NUMBER EXTRA		BASIC F	EE 385.0	٦	BASIC FE		
TOTAL CHARGEABLE CLAIMS			24	าเกบร 20=	٠ 4	4		X\$ 9.	36	OF			
INDEPENDENT CLAIMS			3 minus 3 = 1			·		X43=	<del></del>	OR	You		
MI	JLTIPLE DEPE	ENDENT CLAIM F	RESENT	RESENT				+145=	1161	Jon Jon			
·• I	* If the difference in column 1 is less than zero, enter "0" in column 2								566	OR			
8	8/24/5 (Column 1) (Column 2) (Column 3)								ENTITY	OR	_	THAN	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	-18	Minus	-2	7_	-/		X\$ 9=		OR	X\$18=		
AME	Independent - 3		Minus			/	ſ	X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							. 1 15	-	1	000		
1-21-010							L	+145=	<del>                                     </del>	OR	+290=		
								DDIT. FEE	- 2	JOR ,	ODIT. FEE		
		(Column 1) CLAIMS		(Colum	ST	(Column 3)			LACOL	3 1			
AMENDMENTE		REMAINING AFTER AMENDMENT		PREVIOU PAID FO	ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ž	Total	. 18	Minus	-2		. —	Γ	X\$ 9=		OR	X\$18=		
Ę	Independent	. 3	Minus	3		•—	-	X43=			X86=		
1	FIRST PRESE	NTATION OF MU	LTIPLE DEF	ENDENT C	MIAJ		-		-	OR			
							Ŀ	+145=		OR	+290=		
										OR A	TOTAL DOT. FEEL		
_		(Column 1)		(Column		(Column 3)	٠.	•	·		_	· I	
menomen c		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBEI PREVIOUS PAID FO	R SLY	PRESENT EXTRA	ſ.	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	otal	•	Vinus .	**		-	1	<b>(\$9</b> ≥		OR	X\$18=	166	
_			Viinus	••• ·	1	•	$\vdash$	(43=		· -			
L	RST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Ľ	173=		OR	X86=		
H =	If the entry in column 1 is less than the entry in column 2, write "O" in column 3.									OR	+290=		
"If the "Highest Number Proviously Pale For IN THIS SPACE is less than 20, enter "20."  If the "Highest Number Proviously Pale For IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE OR ADDIT. FEE													
Th	e Trighest Numb	per Previously Paid	ror in this For (Total or i	SPACE is le: Independent)	is the h	3. enter "3," . Ighesi number te			repriate box				